

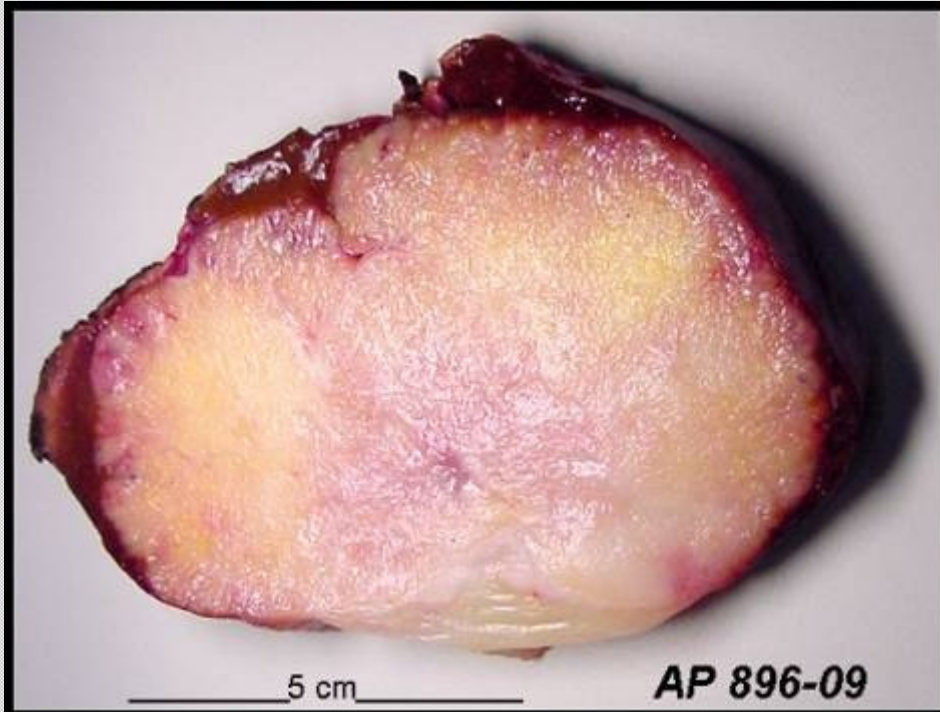
CASO DO MÊS

**SOCIEDADE BRASILEIRA
DE PATOLOGIA**

Celso Rubens Vieira e Silva

Dados Clínicos

- Tumor de fígado
- Mulher
- 45 anos



AP 896-09

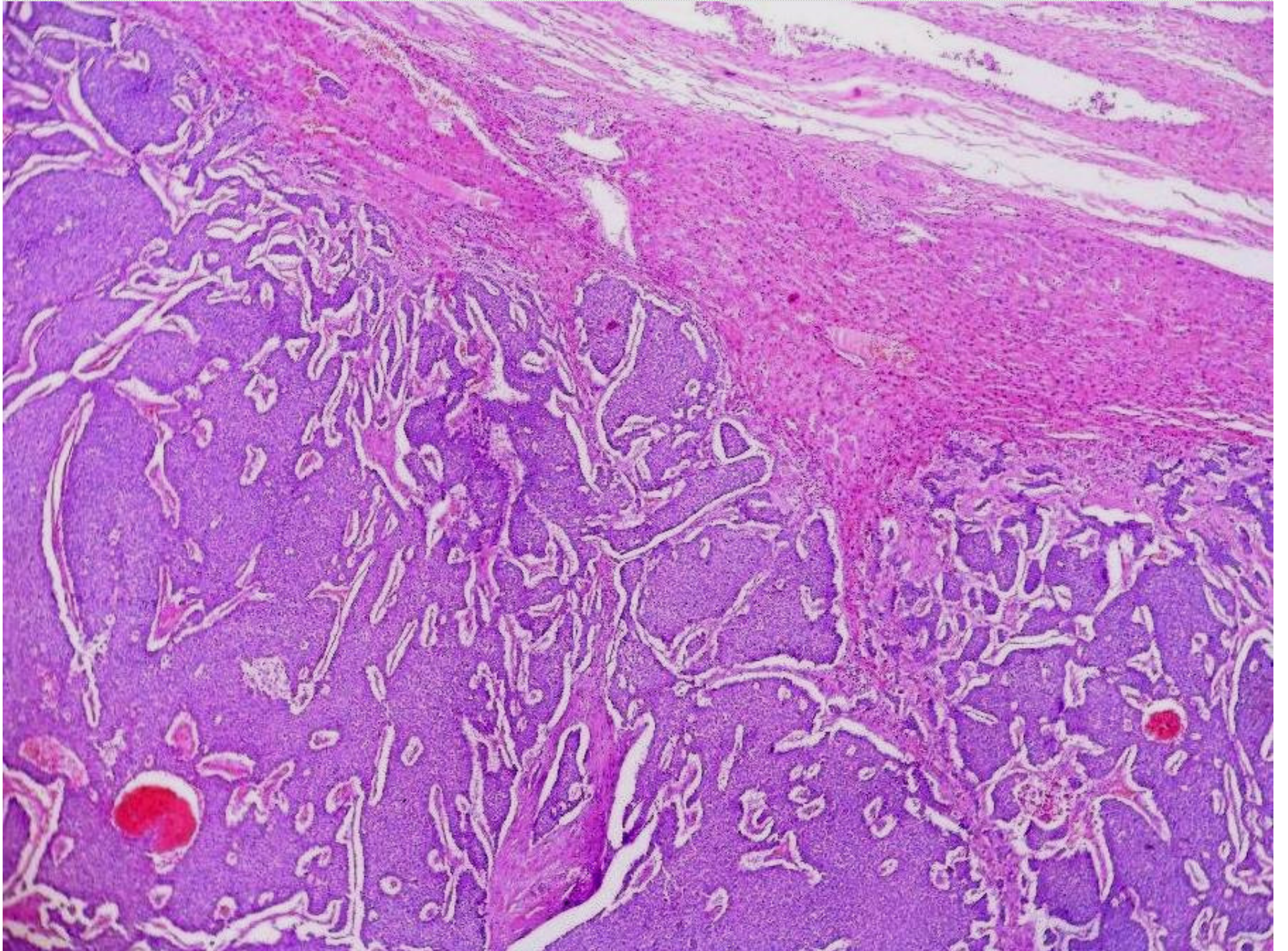
10 X 9 X 6,5 cm

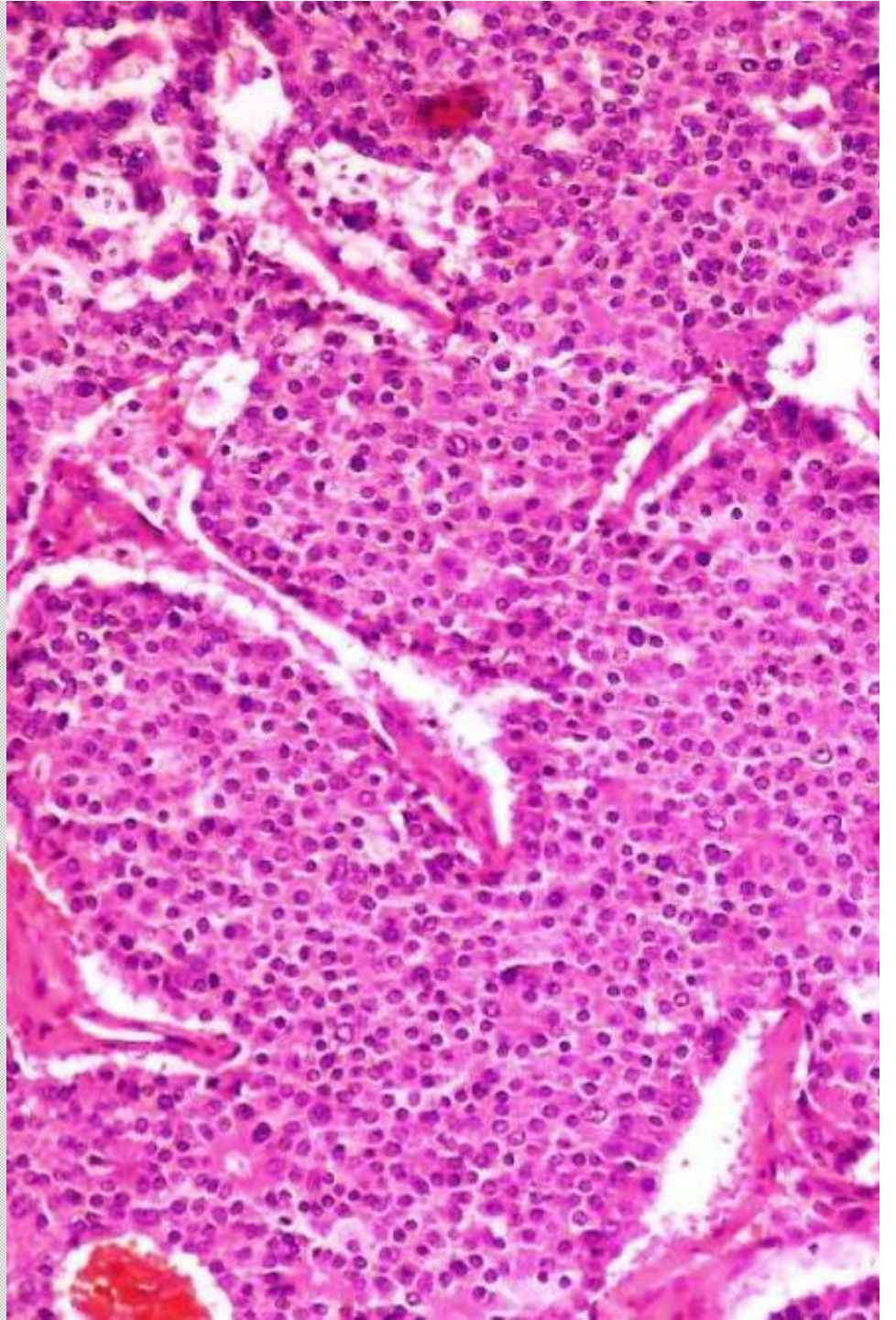
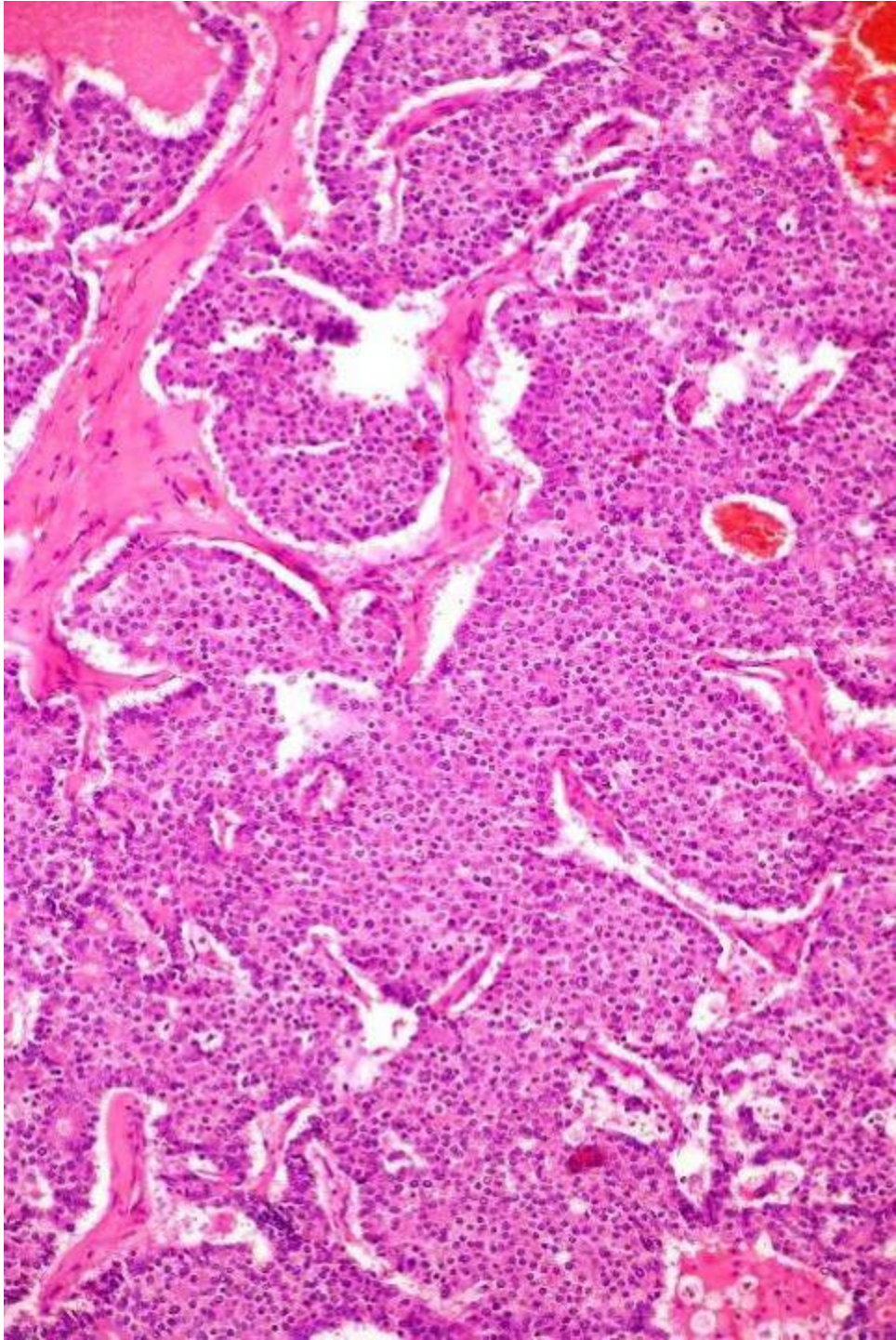
+ 17 linfonodos

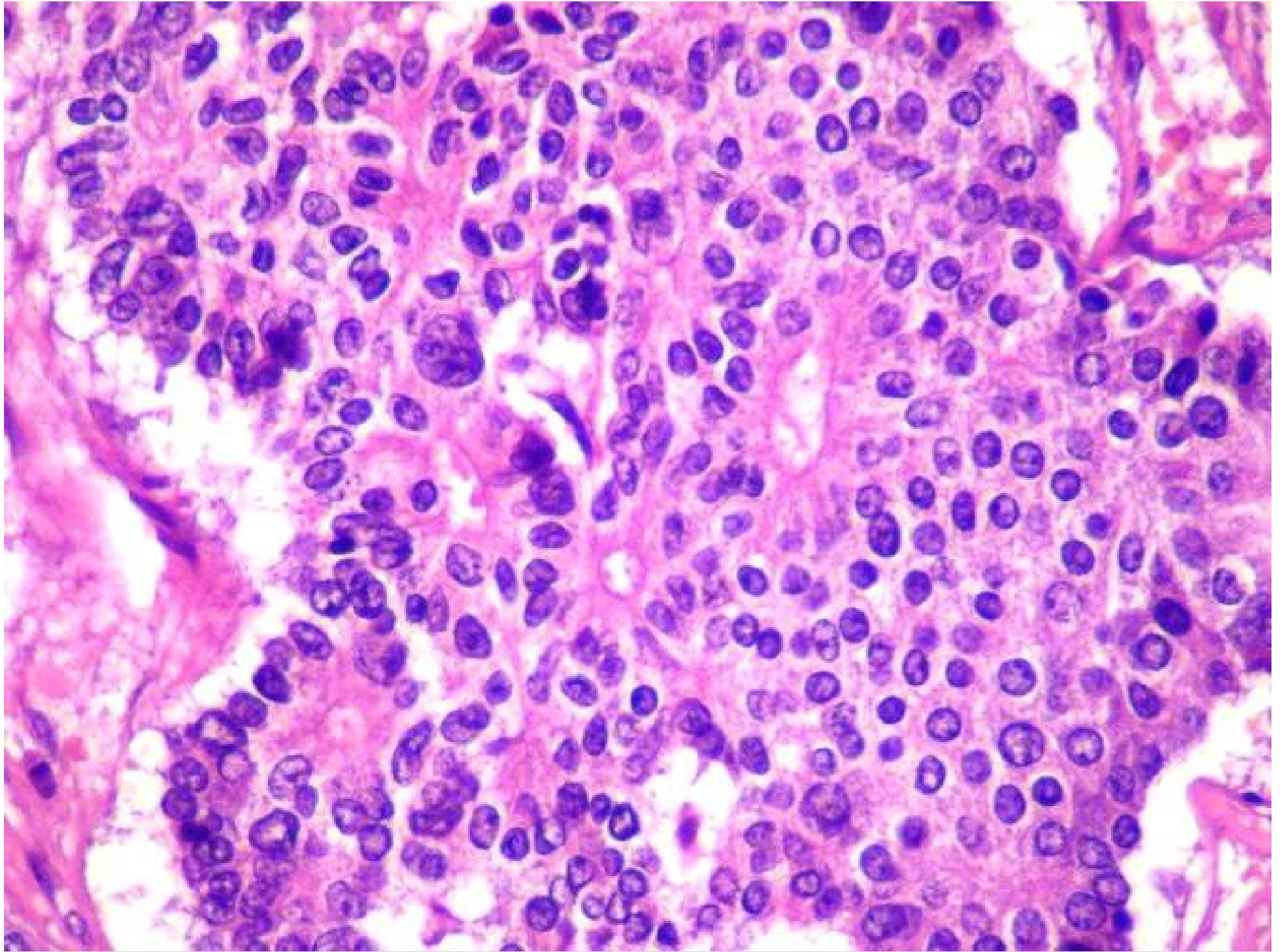


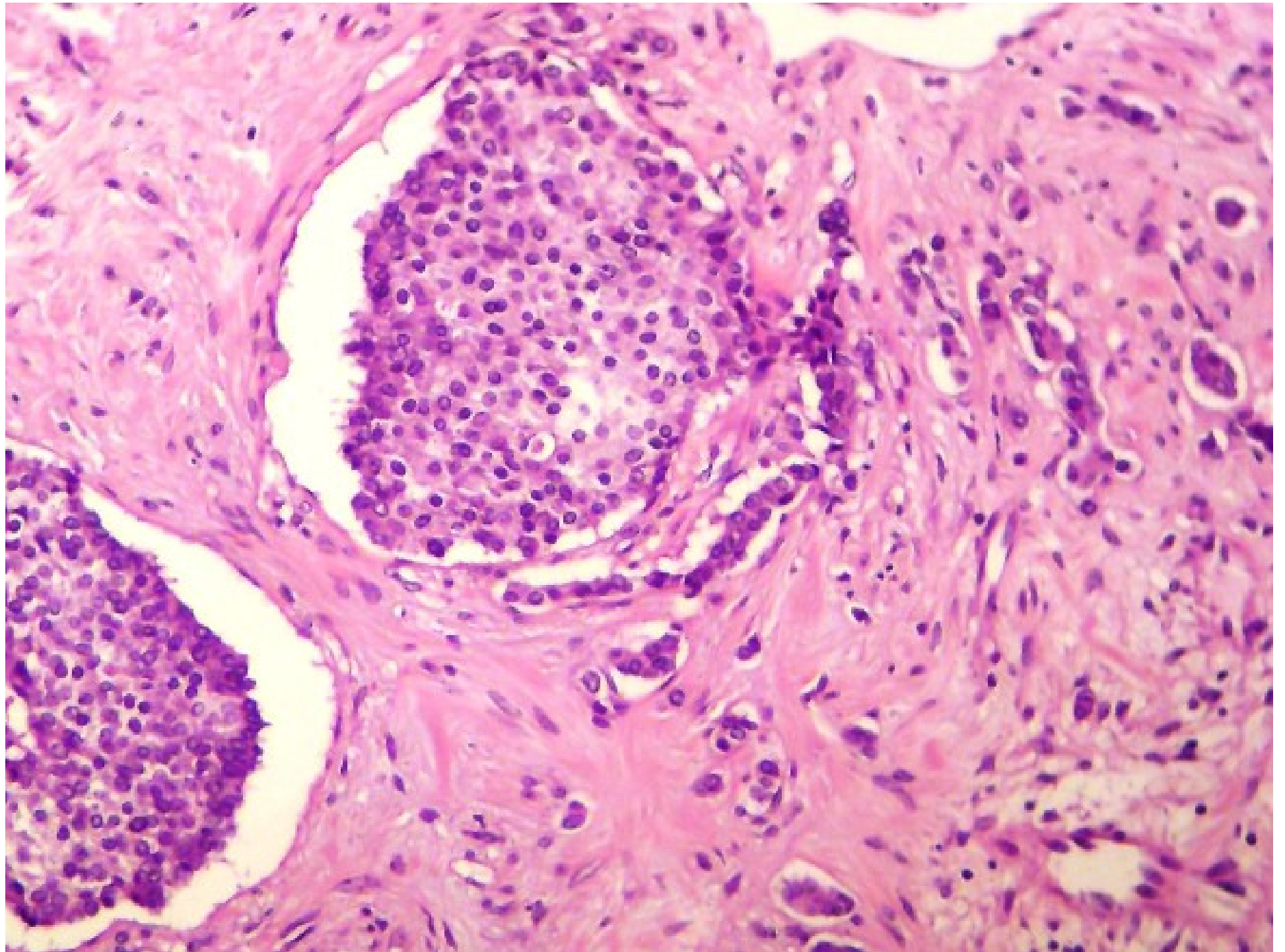
820 g
18 X 14 x 8 cm

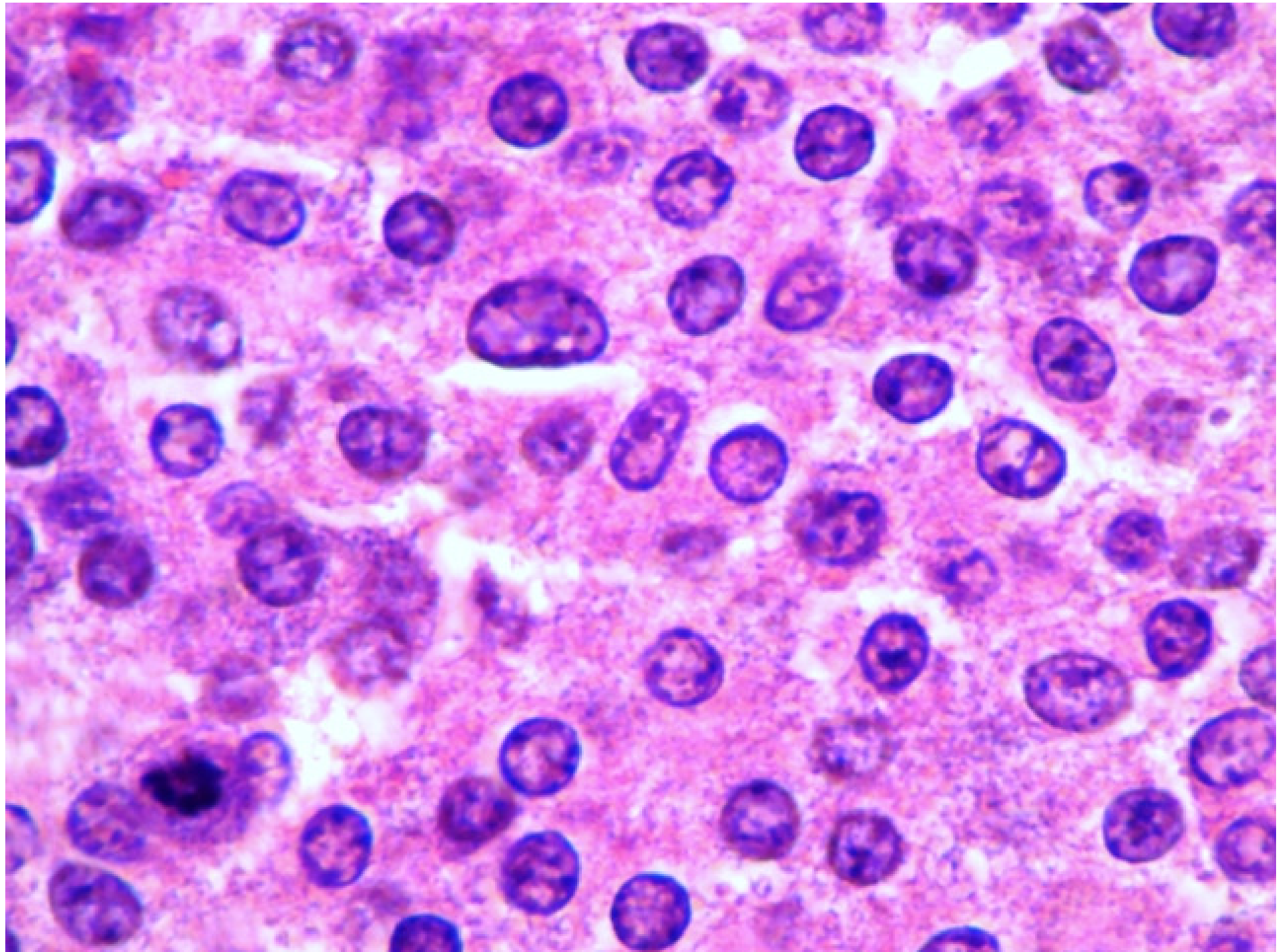


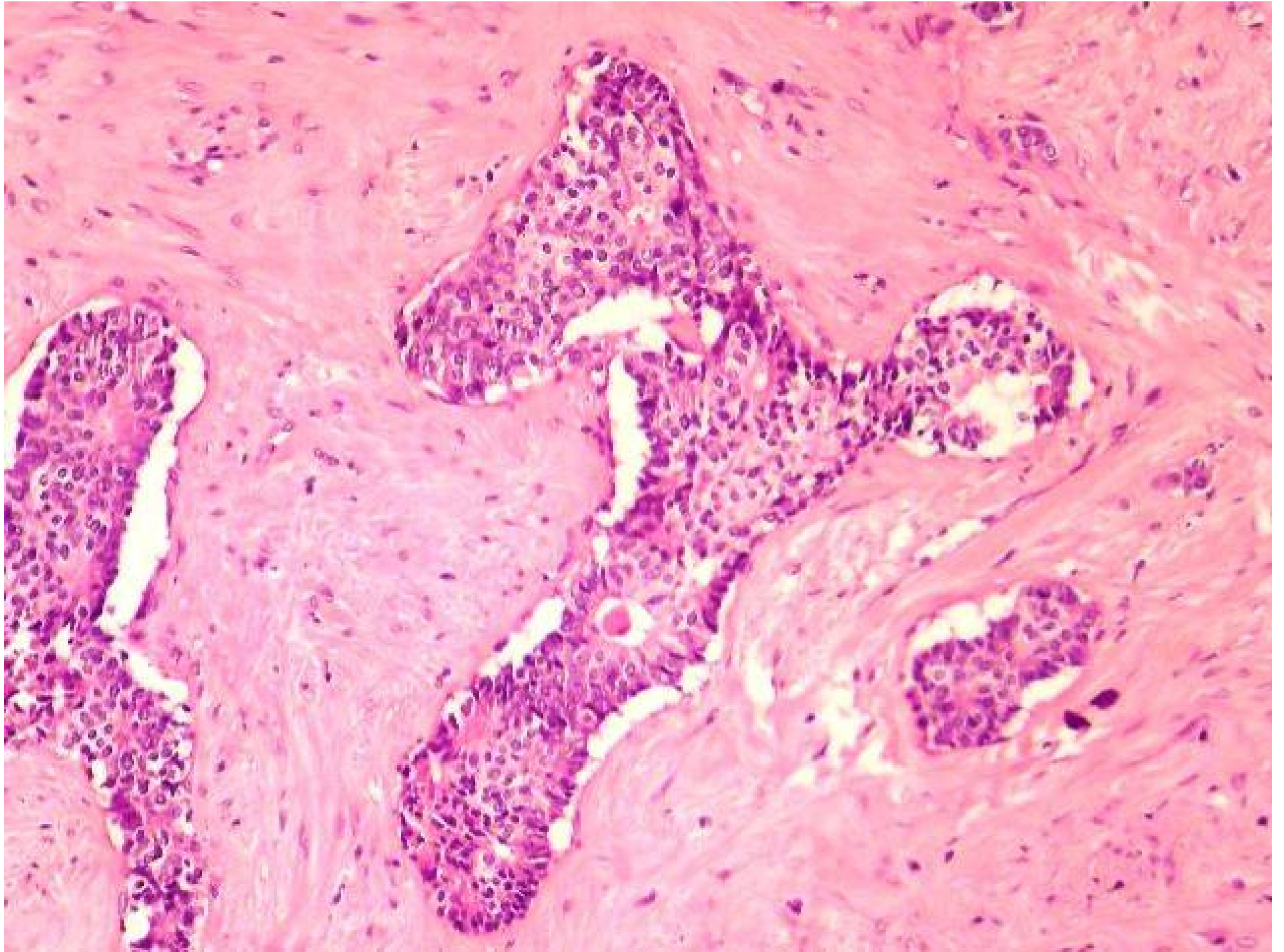


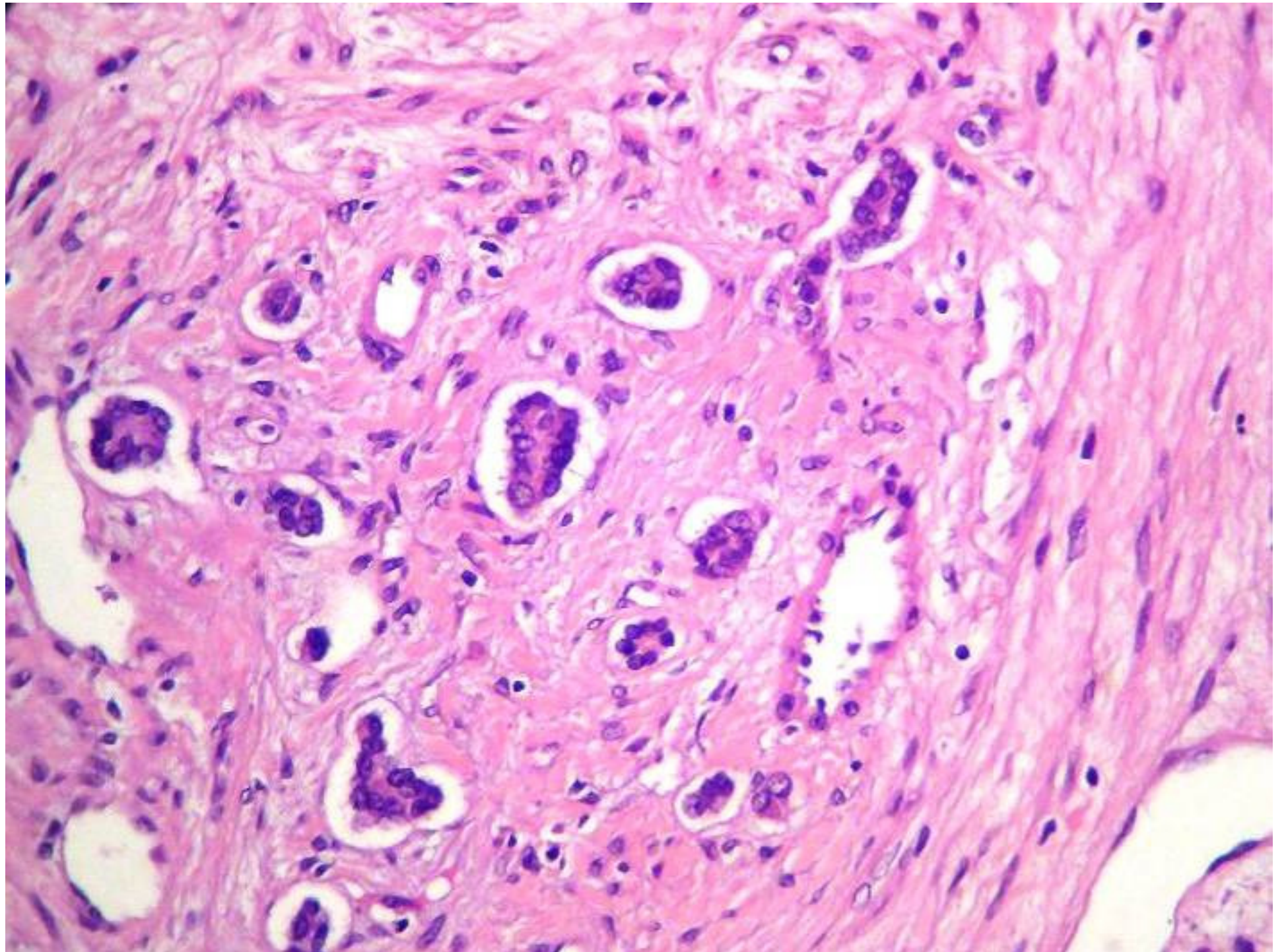


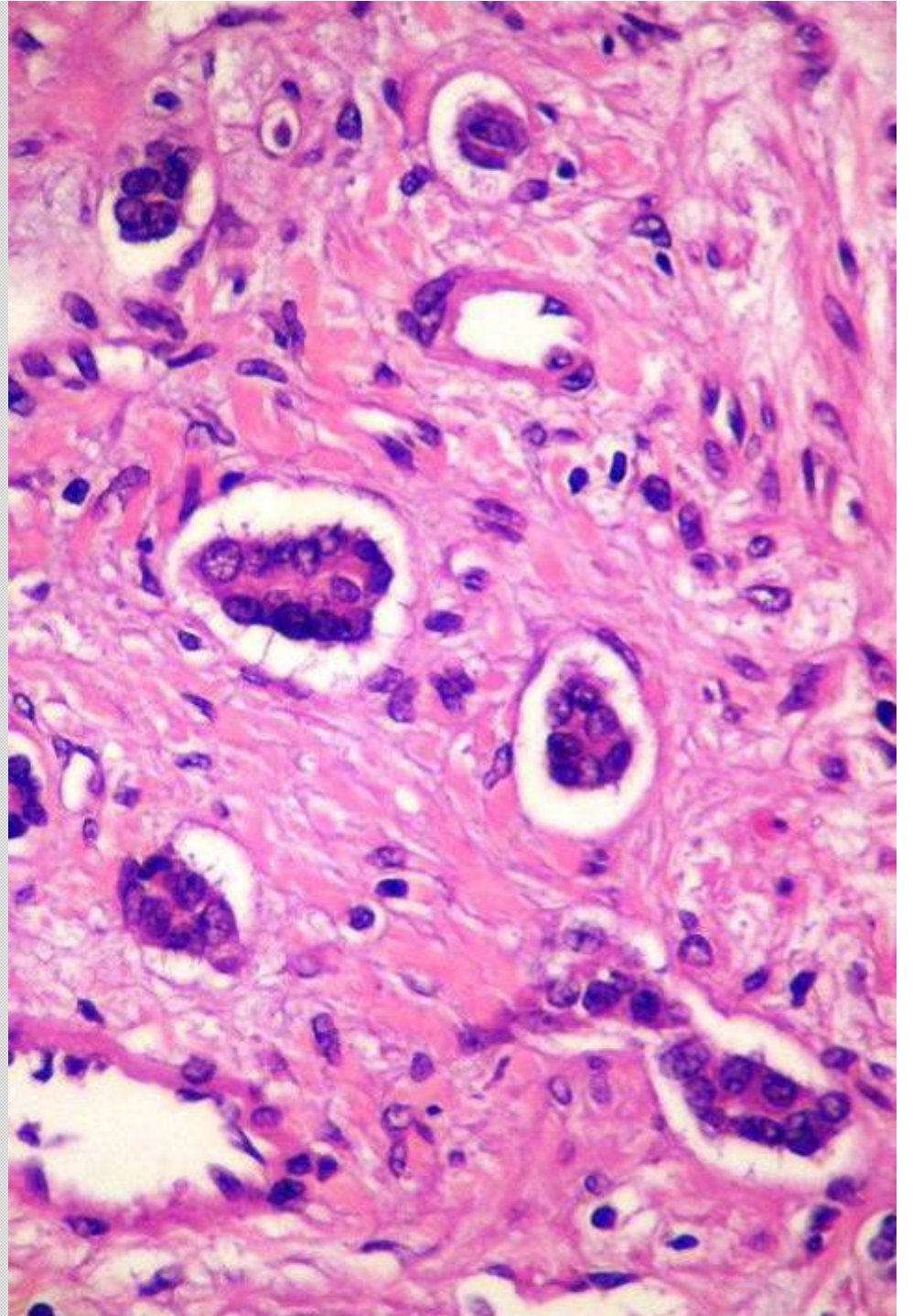
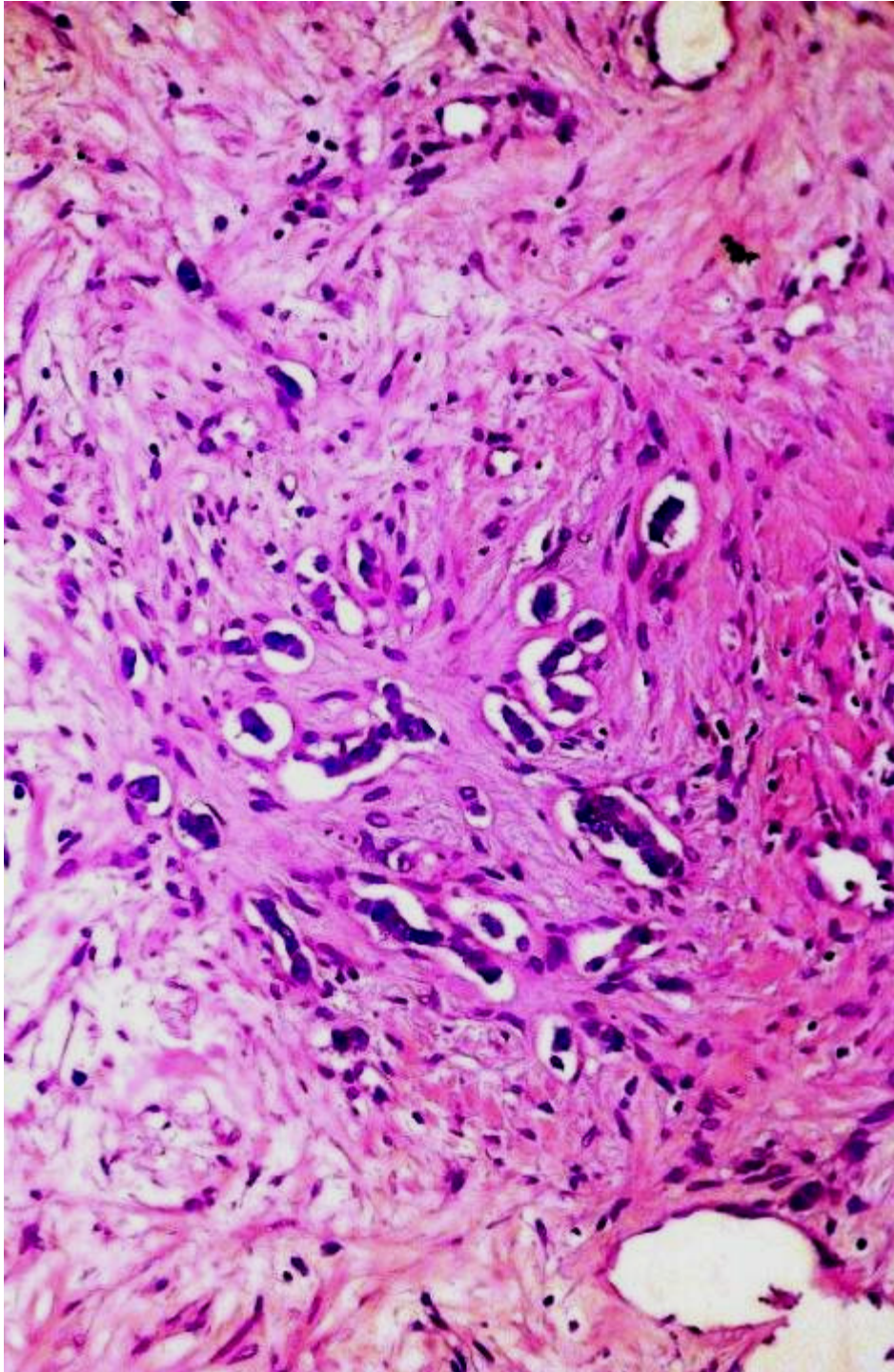


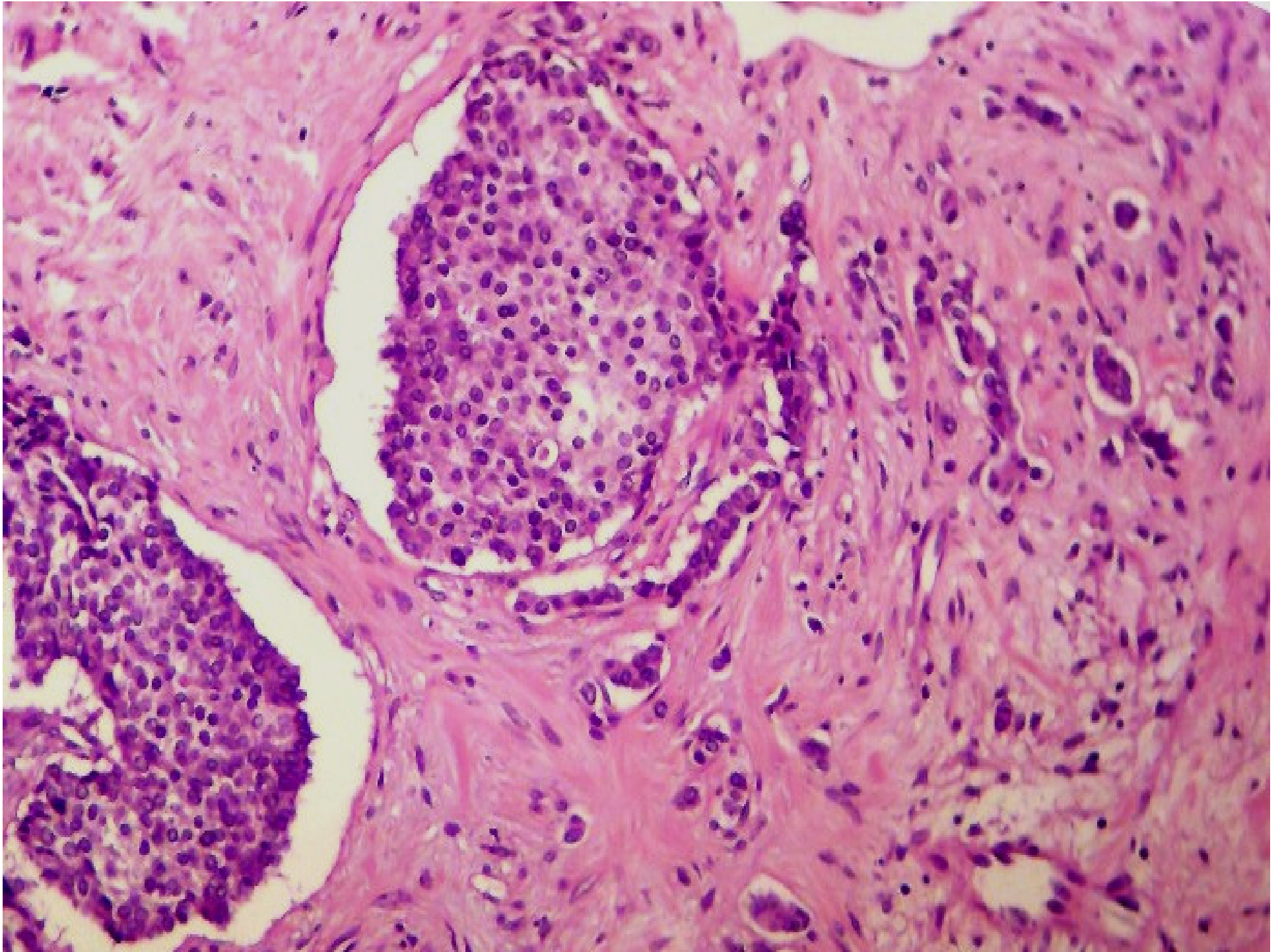


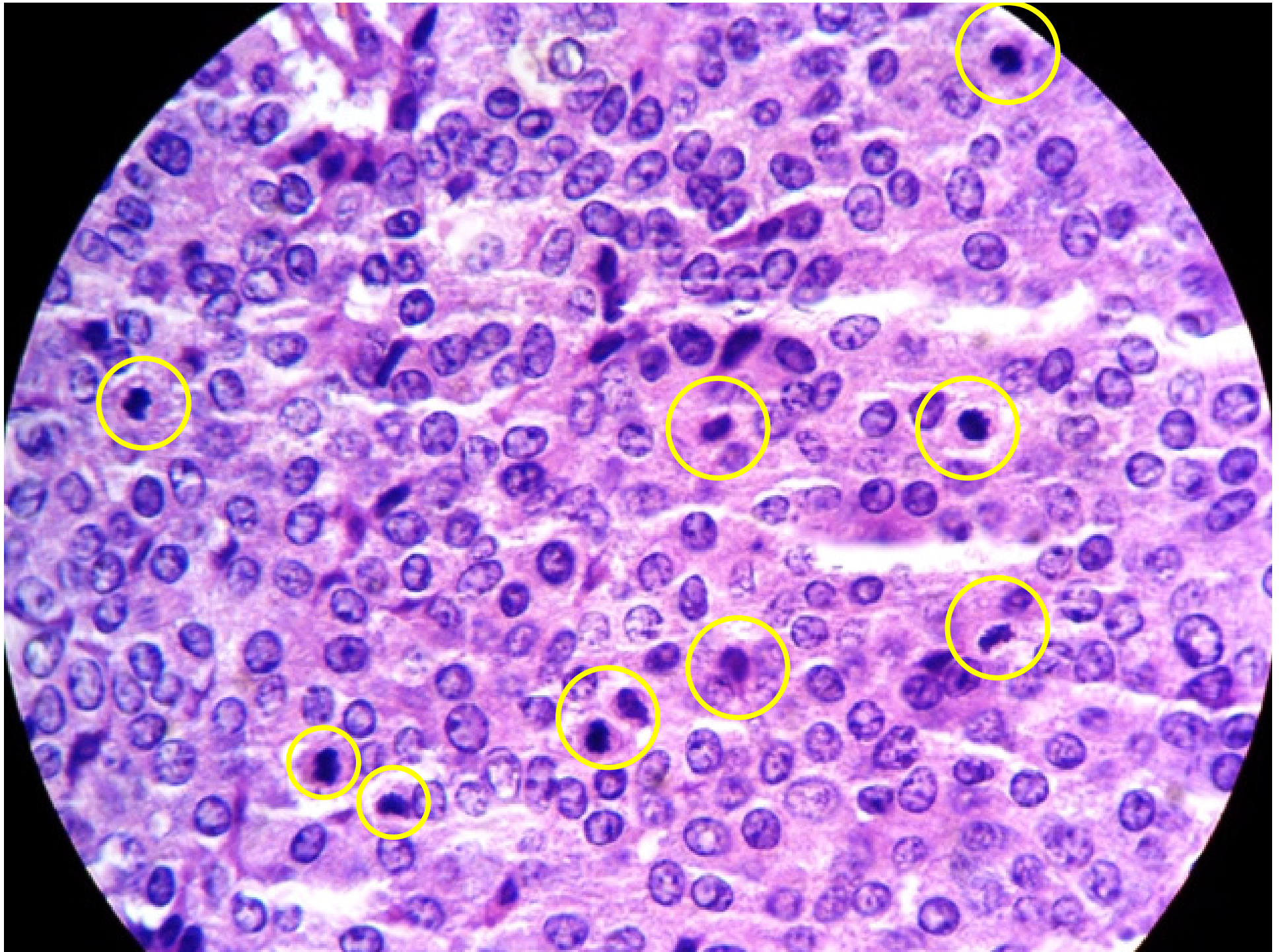


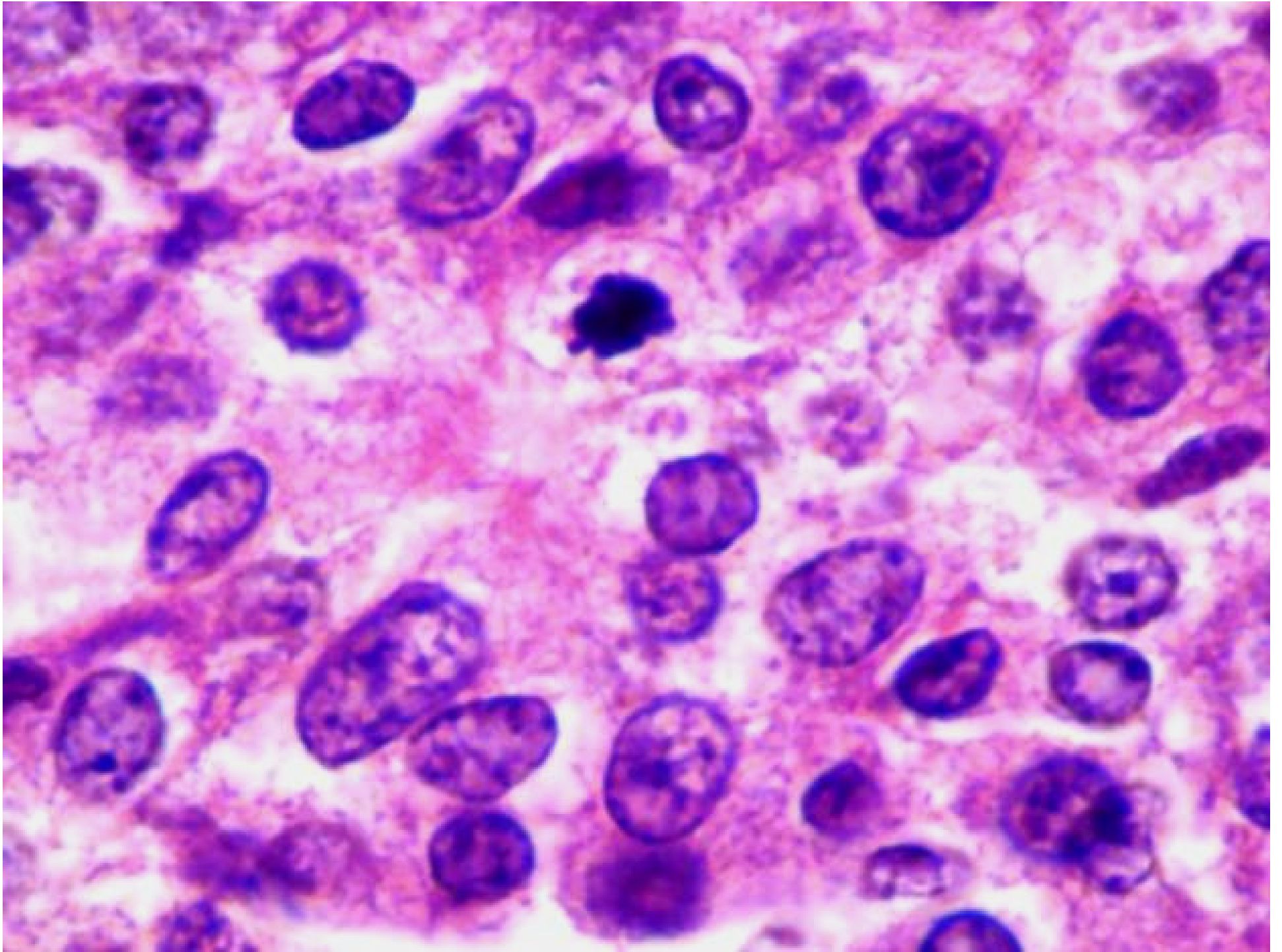


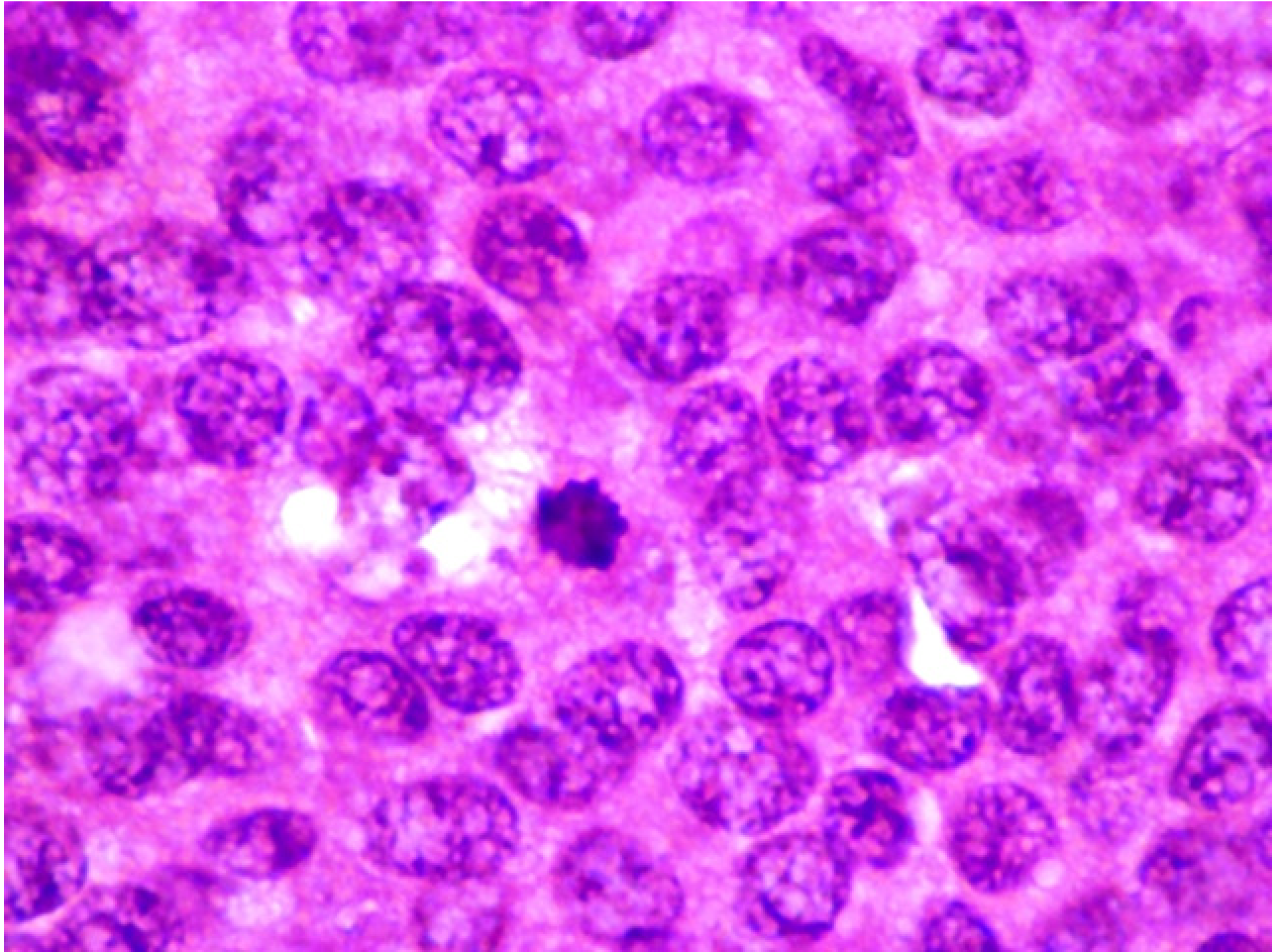


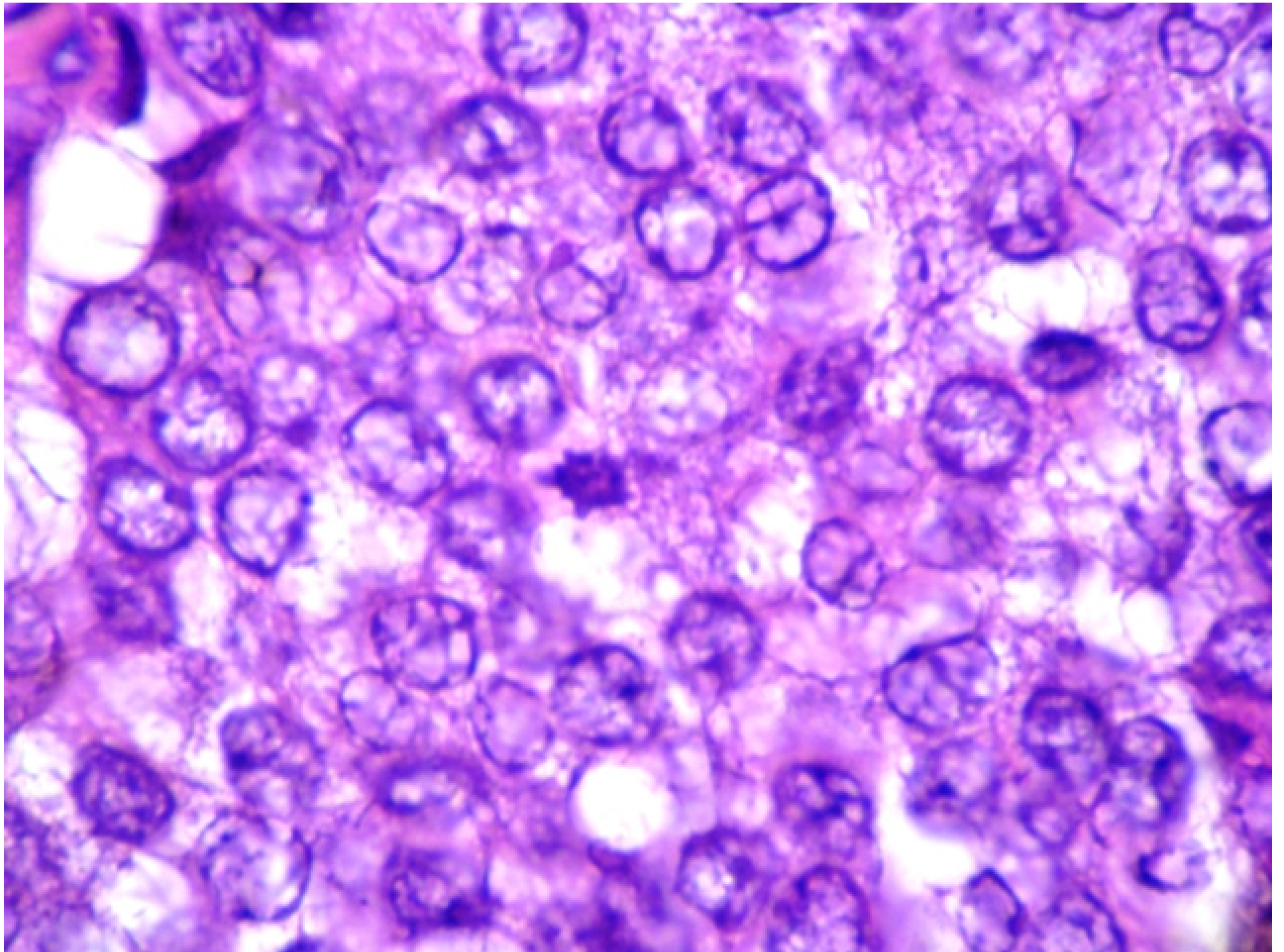




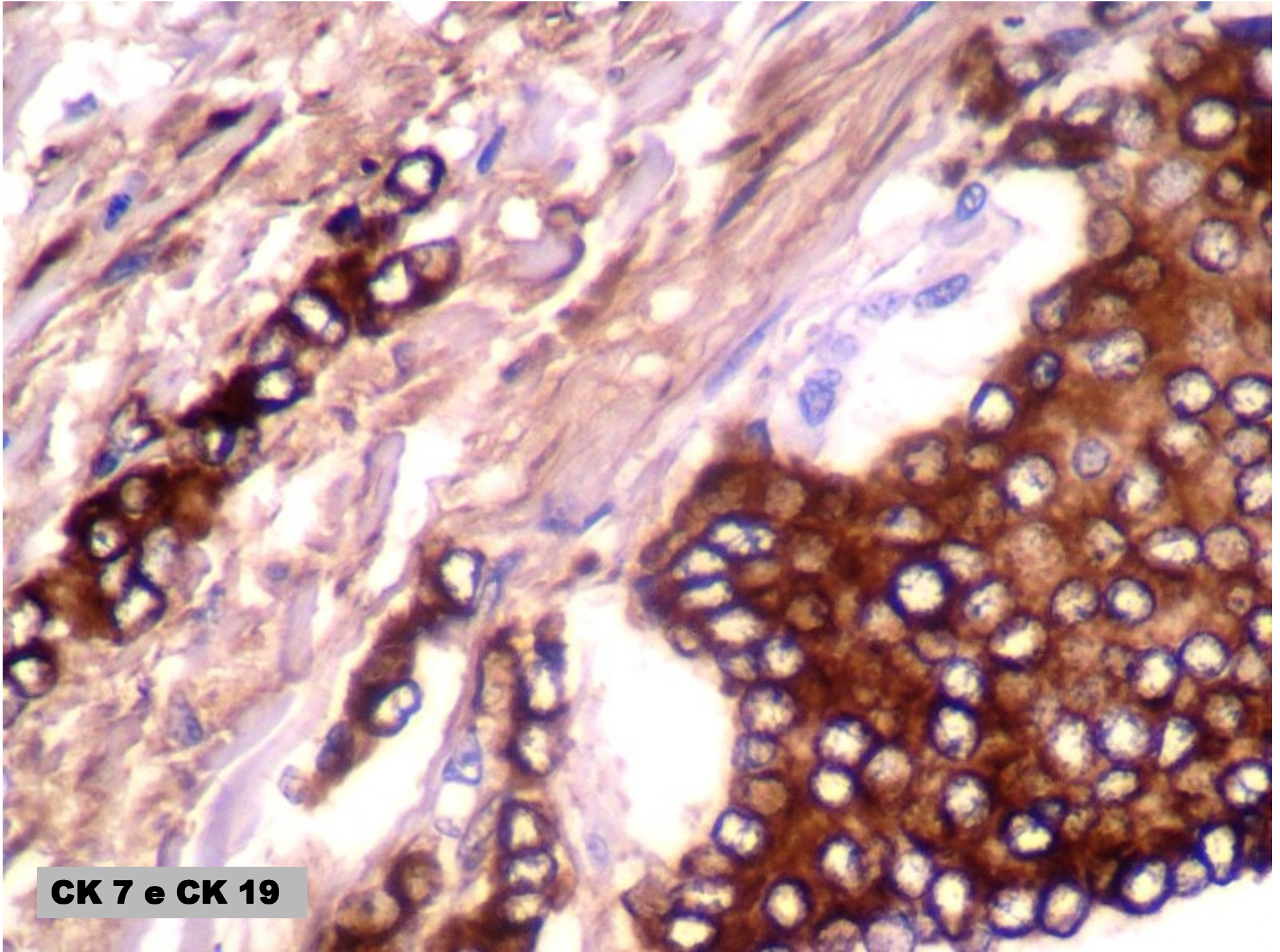




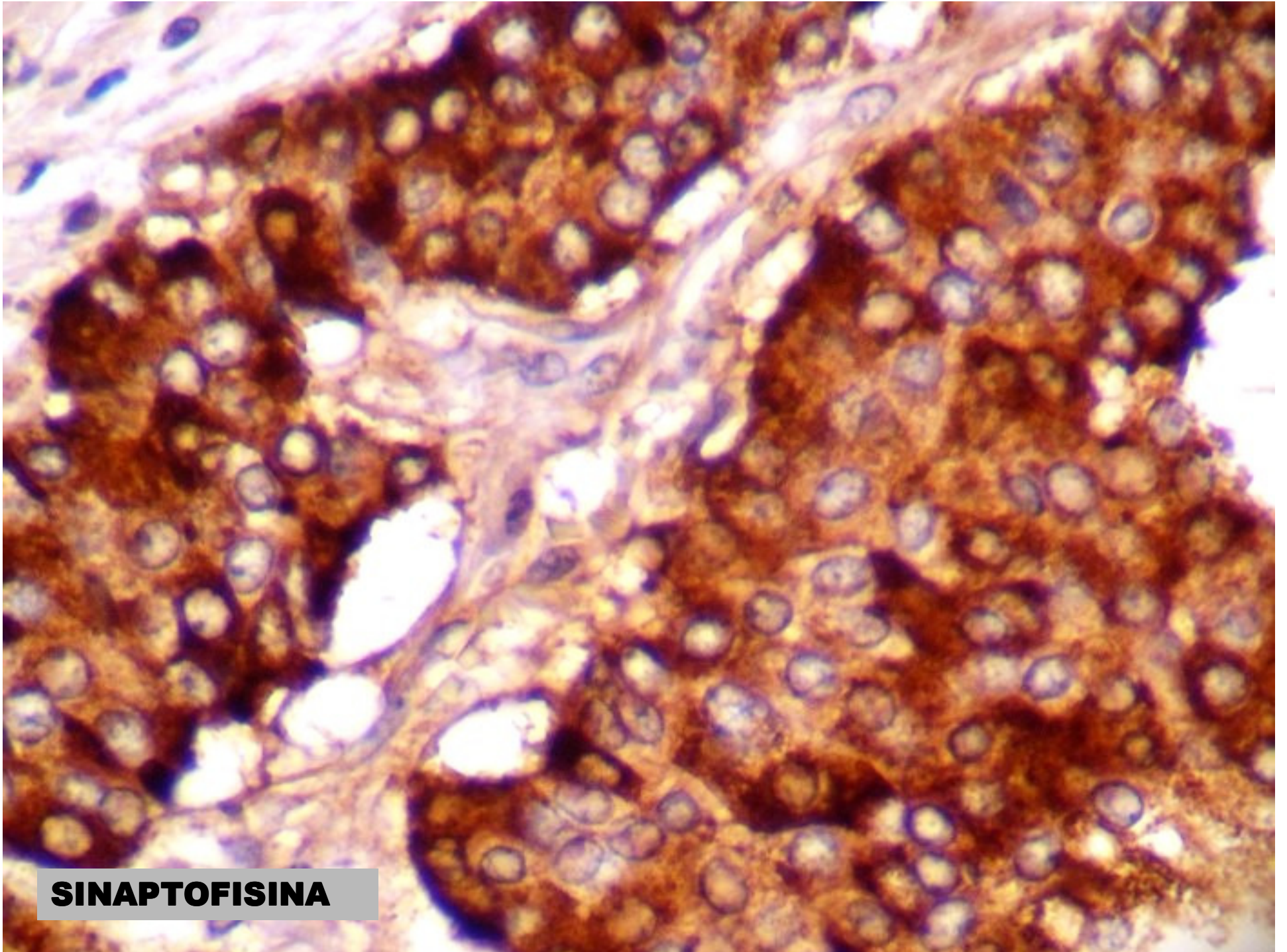




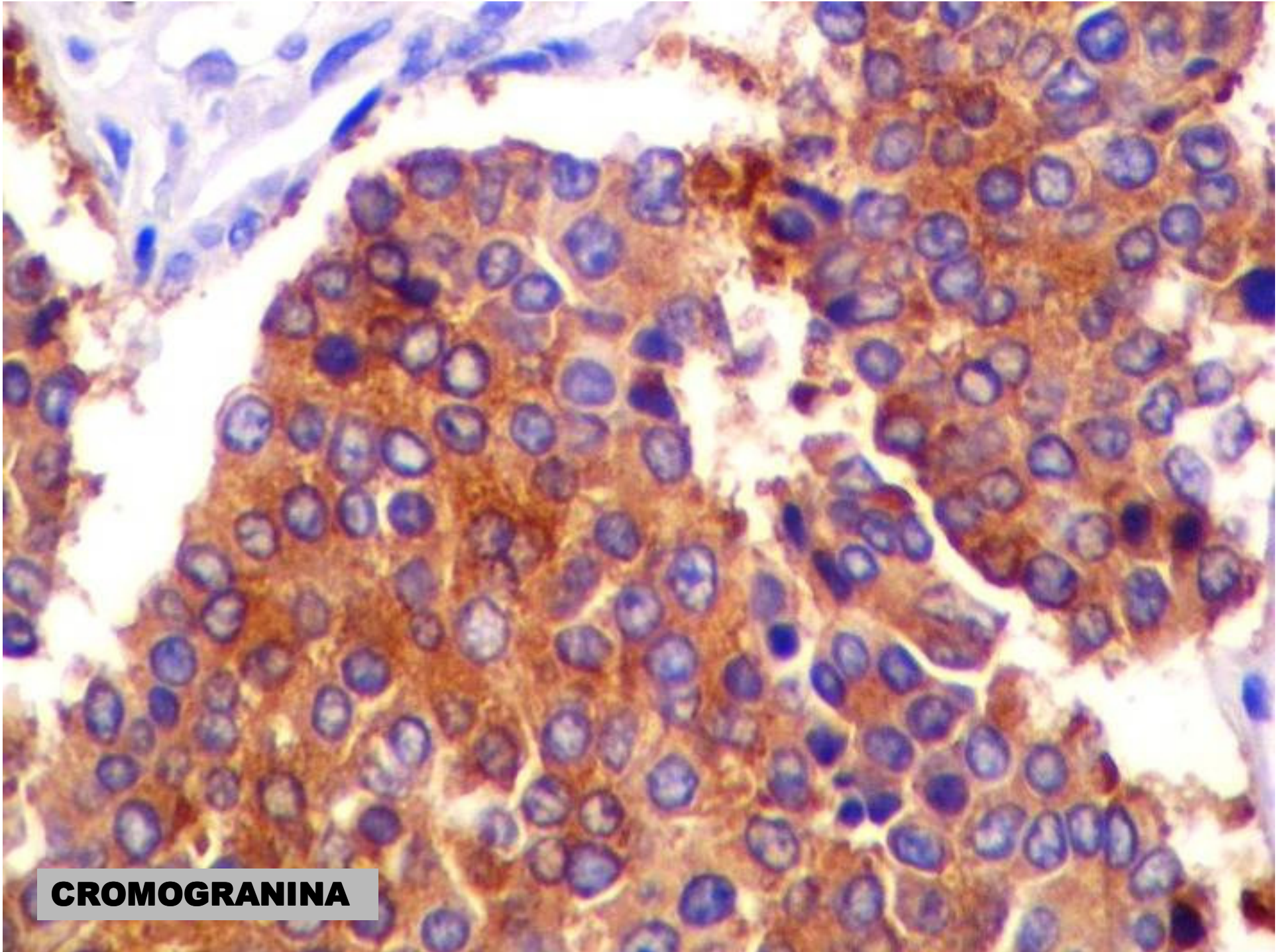
IMUNOISTOQUÍMICA



CK 7 e CK 19



SINAPTOFISINA



CROMOGRANINA

1] Tumor de fígado:

DIAGNÓSTICO PROVISÓRIO:

NEOPLASIA EPITELIAL MALIGNA PROVÁVELMENTE COMPOSTA DE COLANGIOCARCINOMA E DE CARCINOMA NEUROENDÓCRINO DE ALTO GRAU (PREDOMINANTE).

2] Margem cirúrgica:**LIVRE DE NEOPLASIA.** 3] Vesícula Biliar:**COLELITÍASE.** 4] Peritônio diafragmático e 5] Pequeno epíplon::**NÓDULOS DE REATIVIDADE MESOTELIAL E VASCULAR, SEM NEOPLASIA.** 6] Linfonodos do hilo: **METÁSTASES DA NEOPLASIA EM DOIS DE QUATRO LINFONODOS (2/4)** 7] Linfonodo da cadeia hepática: **METÁSTASE DA NEOPLASIA NO LINFONODO (1/1)** 8] Linfonodos intercava-aorta: **METÁSTASES DA NEOPLASIA EM OITO DOS DEZ LINFONODOS (8/10)** 9] Linfonodos inframesocólicos para-cava esquerda:**METÁSTASES DA NEOPLASIA EM UM DE DOIS LINFONODOS (1/2)** 0] L) Peritônio inframesocólico: **PRESENÇA DE PEQUENO LINFONODO LIVRE DE NEOPLASIA.**

Nota; Aguarda complementação de imunoistoquímica de linfonodo e do tumor (áreas com histologia compatível com colangiocarcinoma).

Metástases nodais: 12 em 17.

Pathology - Research and Practice
Article in Press,

Hepatic composite tumor in a patient with primary sclerosing cholangitis

Stephanie Koplina and Rashmi Agni

Department of Pathology and Laboratory Medicine, University of Wisconsin Hospital and Clinics, Madison, WI, USA

Received 3 July 2008; accepted 20 November 2008. Available online 19 January 2009.

Abstract

A focal intrahepatic enhancing lesion with associated bile duct stricture was identified in a 25-year-old woman with a history of primary sclerosing cholangitis (PSC) who was being evaluated for increasing liver enzymes. **Partial hepatectomy was performed, revealing a composite tumor with neuroendocrine and cholangiocarcinomatous differentiation. Only one composite tumor of the liver has been previously reported in the literature** [H. Hidaka, S. Kuwao, S. Kokubu, K. Yanagimoto, A. Satomichi, M. Takada, T. Nakazawa, K. Saigenji, *Mixed carcinoid-adenocarcinoma of the liver*, *Intern. Med.* 39 (2000) 910–913], and to our knowledge, this is the first report of such a tumor in association with PSC. We report this very unusual case and discuss the potential association of neuroendocrine carcinoma with primary sclerosing cholangitis.

Keywords: Composite tumor; Carcinoid; Neuroendocrine carcinoma; Cholangiocarcinoma; Primary sclerosing cholangitis

Intern Med. 2000 Nov;39(11):910-3.

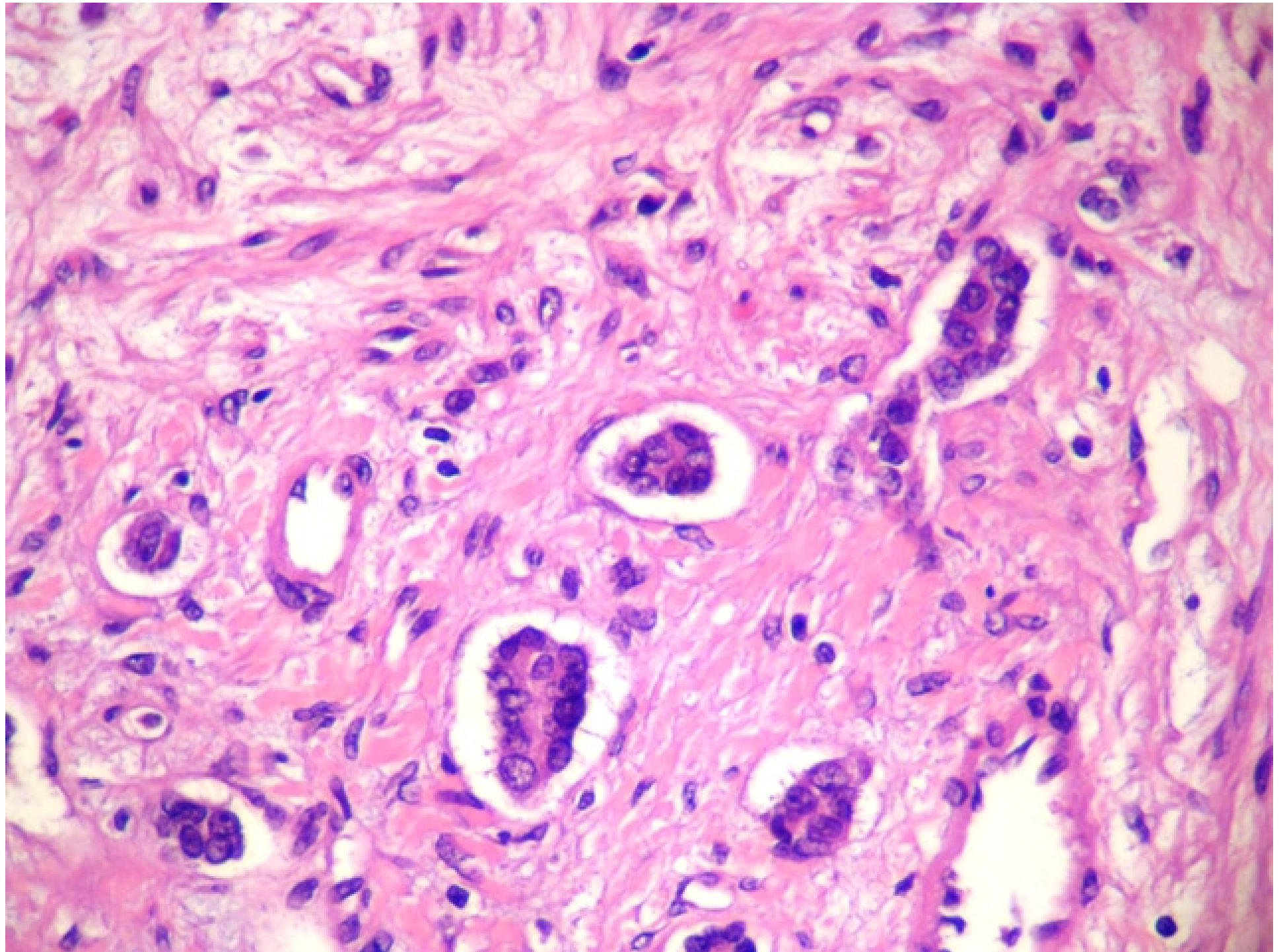
Mixed carcinoid-adenocarcinoma of the liver.

Hidaka H, Kuwao S, Kokubu S, Yanagimoto K, Satomichi A, Takada M, Nakazawa T, Saigenji K.

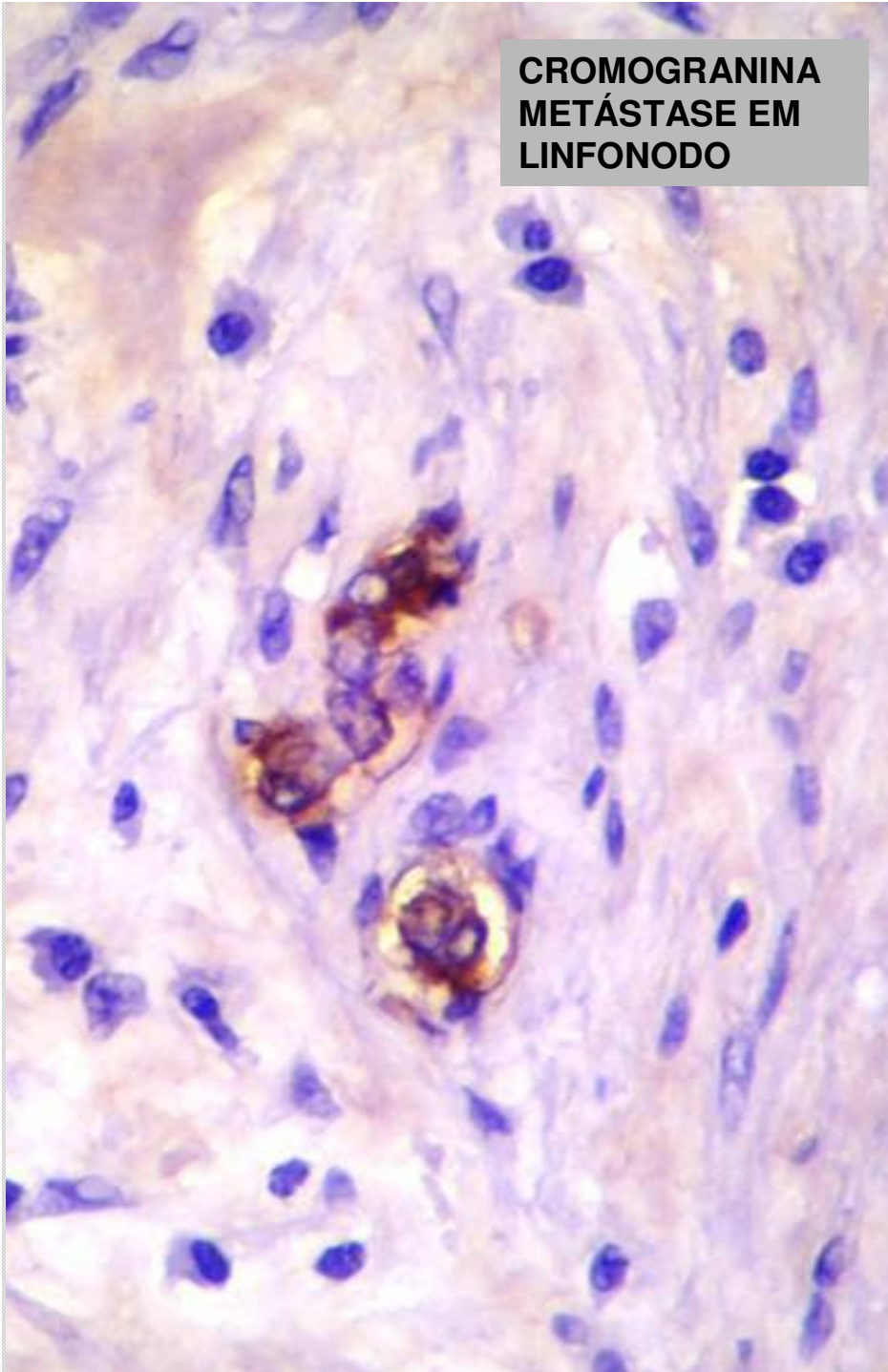
Department of Internal Medicine, Kitasato University School of Medicine, Kanagawa.

**Continuidade do caso:
Carcinoma Neuroendócrino em fígado.
AP 896-09 e IH 130-09**

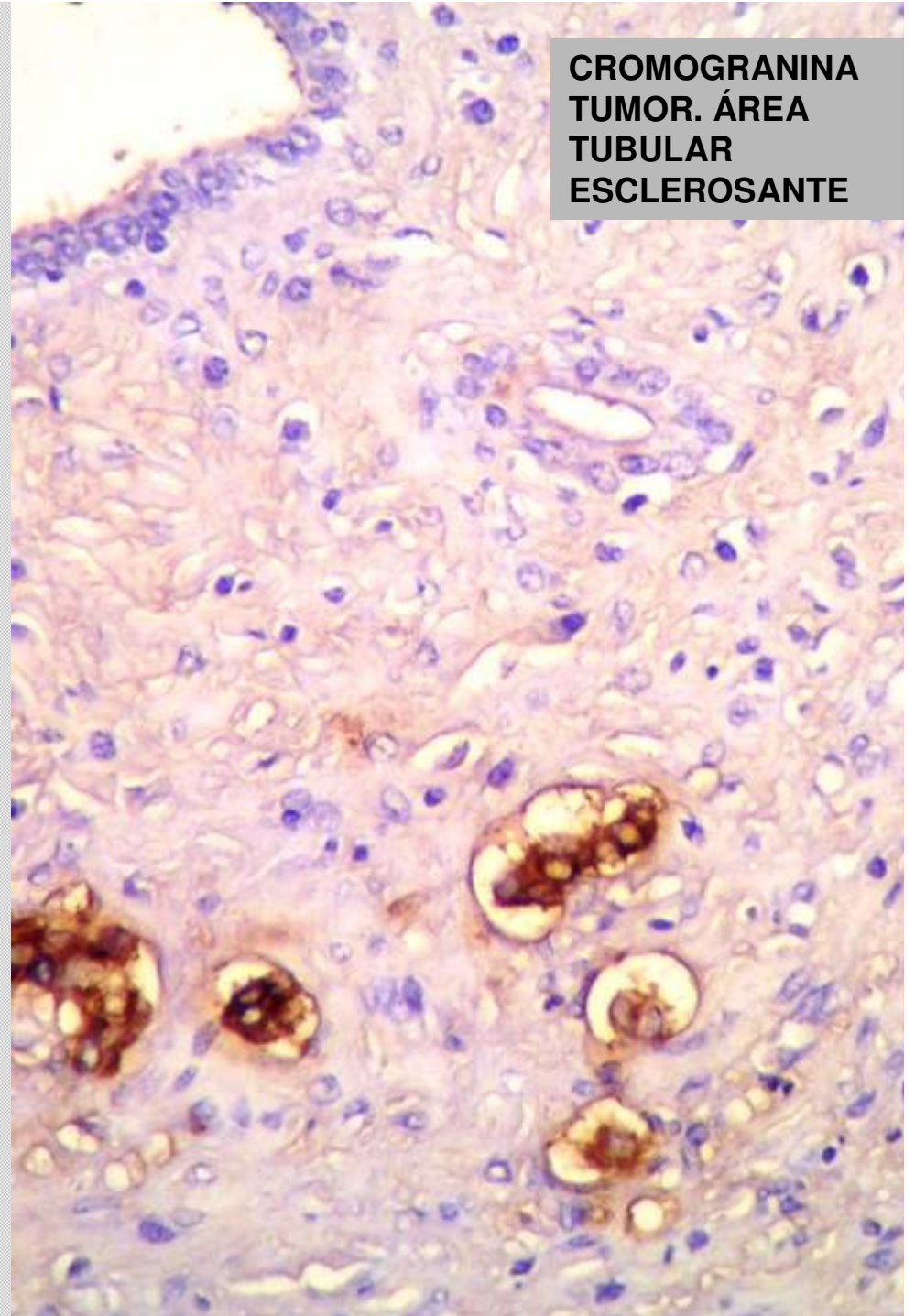
Foram feitas as reações IHQ para Cromogranina , Sinaptofisina e CD-56, nas áreas de padrão histológico de colangiocarcinoma” e também na metástase.

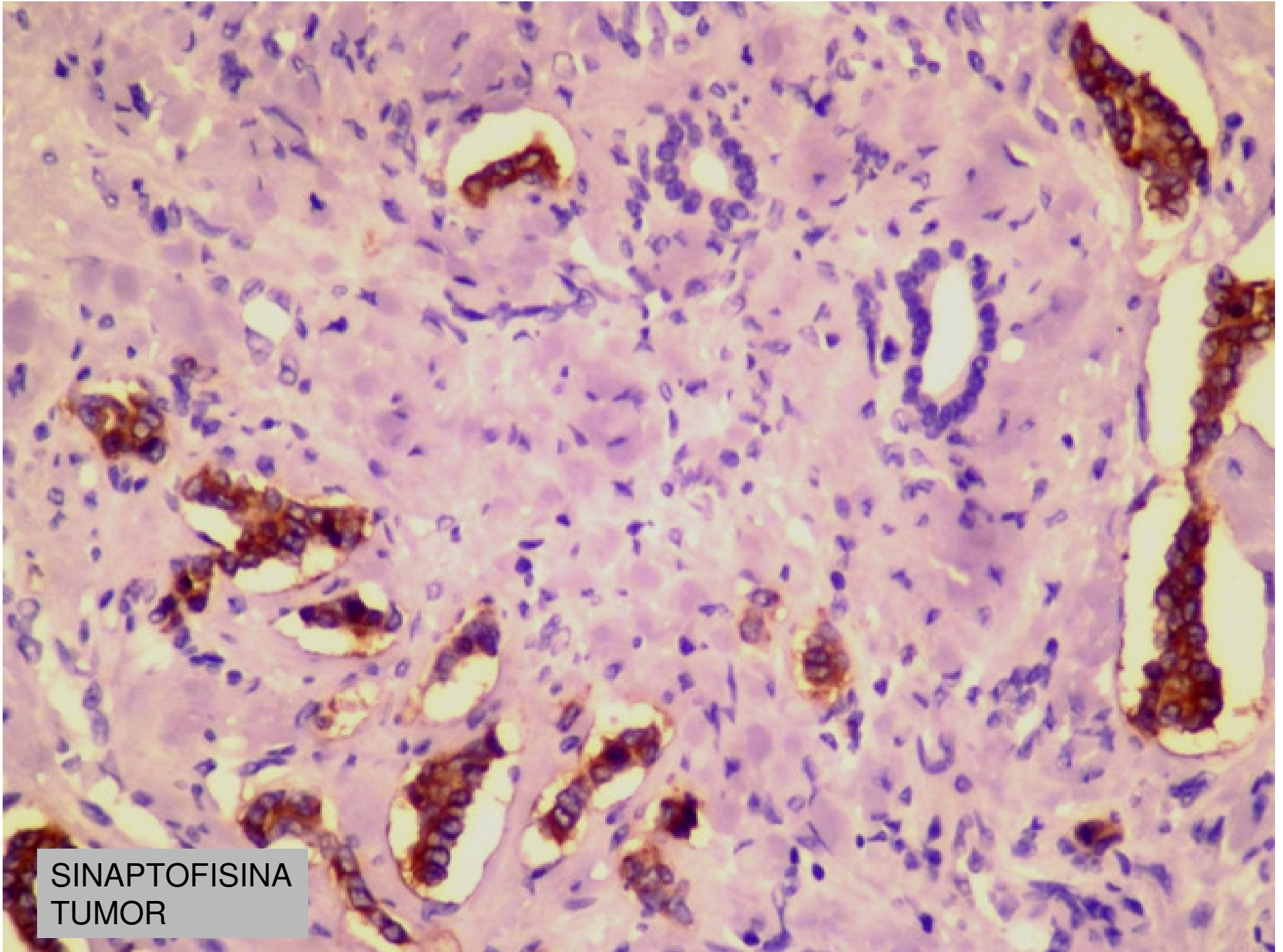


**CROMOGRANINA
METÁSTASE EM
LINFONODO**

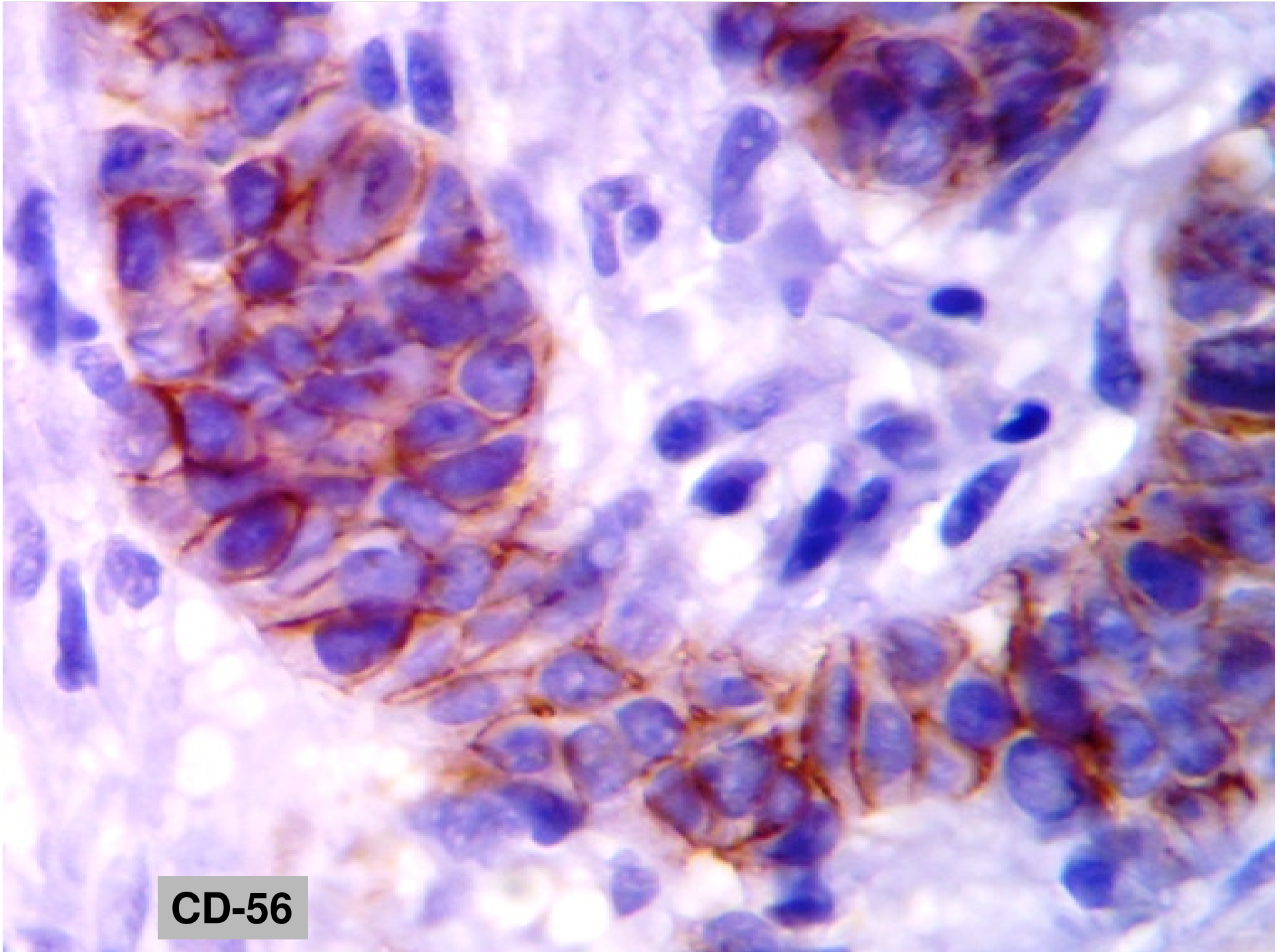


**CROMOGRANINA
TUMOR. ÁREA
TUBULAR
ESCLEROSANTE**





SINAPTOFISINA
TUMOR



CD-56

Diagnóstico

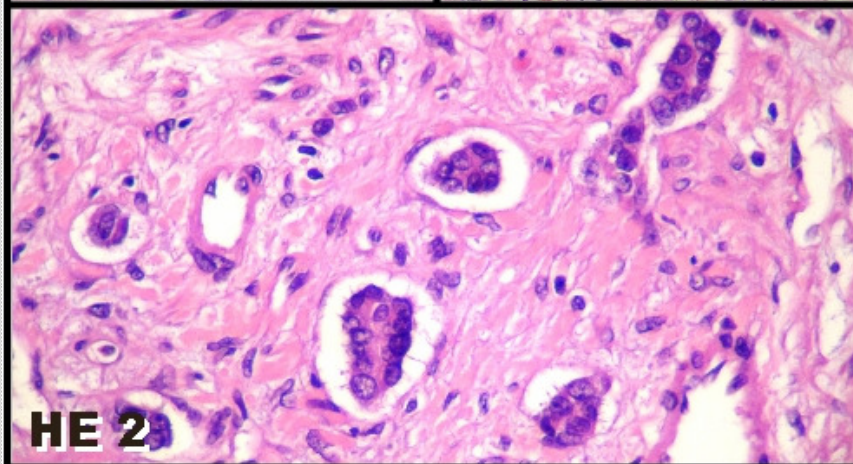
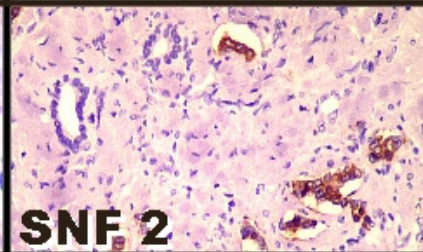
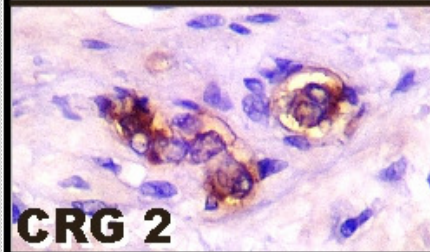
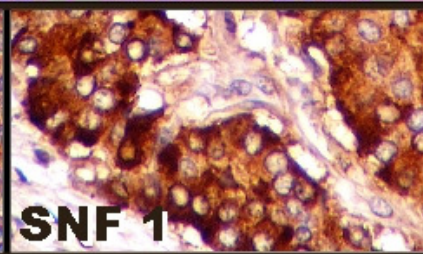
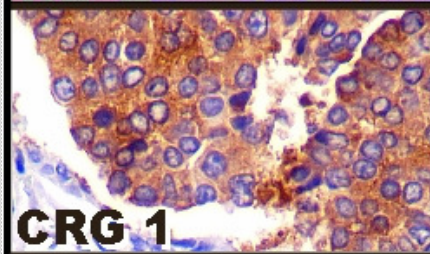
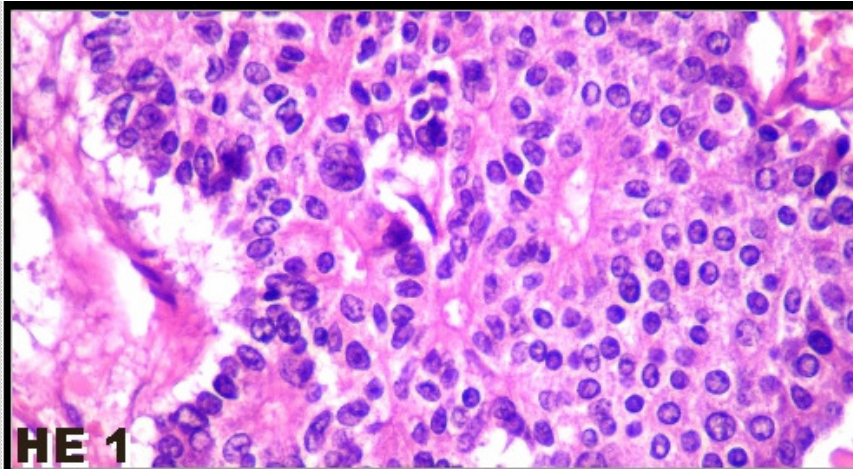
IH 130-09

- Tumor hepático:

QUADRO HISTOLÓGICO E EXPRESSÕES IMUNOISTOQUÍMICAS DIAGNÓSTICAS DE “CARCINOMA NEUROENDÓCRINO” COM ÁREAS BEM DIFERENCIADAS E POUCO DIFERENCIADAS ASSOCIADAS A REGIÕES COM HISTOLOGIA COLANGIOCARCINOMA-SÍMILE”.

Nota:

Condição rara, se considerada como primária hepática (e assim os dados da exploração cirúrgica, a avaliação clínico-laboratorial e os exames de imagens, fazem crer).



Acontece que ao rever o caso...

**descobrimos que a paciente tinha sido
apendicectomizada em 2006 ...**

**Apendicite aguda em
2006 - AP 1854-06**

**Sem qualquer indício
de carcinóide
apendicular!**

CASE REPORT

Primary hepatic carcinoid: A case report and literature review

Luigi Maria Fenoglio, et al

World J Gastroenterol May 21, 2009 Volume 15 Number 19

CASO DO MÊS

A Sociedade Brasileira de Patologia agradece a sua participação.

